
Name

FORM #40b

Address

City State Zip Code

Phone Number

PETITIONER PRO SE

**MONTANA TWENTY-FIRST JUDICIAL DISTRICT COURT
RAVALLI COUNTY**

In re the Marriage of:

_____,
Petitioner,

and

_____,
Respondent.

Cause No.: _____

Department No. _____

PRAECIPE

To the Sheriff of Ravalli County:

Please serve upon the Respondent the following documents:

- ☒ Petition for Dissolution of Marriage
- ☒ Summons and Temporary Economic Restraining Order (original and one copy)
- ☒ Petitioner's Preliminary Declaration of Assets, Debts, Income and Expenses
- ☒ Petitioner's Notice of Service of Preliminary Declaration
- ☒ Report to the Court of Social Security Numbers
- ☒ Notice and Acknowledgment of Receipt of Summons and Petition
- ☐ _____
- ☐ _____

Also enclosed is: ☐ The Petitioner's Affidavit and Order of Inability to Pay Filing Fees
which waives the fee for service in this matter; OR
 ☐ \$_____ to cover the fee for service in this matter.

1. A physical description of the Respondent is: _____

2. The Respondent ☐ does ☐ does not carry a weapon.
3. At present, the Respondent can be found:

☐ At his/her residence: _____.
Times normally available at this address: _____.

☐ At his/her place of employment: _____.
Times normally available at this address: _____.

☐ Other: _____.
Times normally available at this address: _____.

Please serve the papers on the Respondent as soon as possible. Please return the original Summons to me at the address above, along with proof of service or a statement that you were unable to locate the Respondent.

DATED this ____ day of _____, 20____.

Petitioner Pro Se

Print Name

Record of Service
(for Sheriff's use only)

I hereby certify that (Choose One):

- [] I personally served the Summons and the accompanying documents listed herein on the Respondent by delivering a copy of said Summons and documents to him/her personally on the ____ day of _____, 20____, in the County of _____, State of _____.
- [] After due effort, I was unable to locate or serve the Respondent in the County of _____, State of _____.

DATED this ____ day of _____, 20____.

Sheriff

By: _____
Deputy Sheriff